

## EMT RECERTIFICATION APPLICATION LOS ANGELES COUNTY EMERGENCY MEDICAL SERVICES AGENCY



APPLICATION – PRINT IN INK OR TYPE  Enclose a self-addressed, stamped envelope			
☐ Recertification - <b>\$87</b> *	□ Recertificatio	n - <b>\$125</b> *	Mail application Los Angeles County EMS Agency
□ Current with L.A. County EN		cation with other CA Certifying Entity	and required Office of Certification
☐ Lapse < 12 months with L.A		onths with other CA Certifying Entity	documents to: 10100 Pioneer Blvd, Suite 200
* The non-refundable fee must a	•	d < 24 months with any CA Certification or Money Order made payable to "Los	Santa Fe Springs, CA 90670
The County charge will be imposed on all checks returned for non-sufficient funds. Do not send cash.			
PERSONAL INFORMATION			
Legal Name			SSN
Last	First	M.I.	
Address			Birth Date
(Home)			
Phone		e-mail	
EMPLOYER			
I am currently employed as	s an EMT □ Yes □ No	If yes, complete company and co	ontact information below
Company		Contact	Phone
	ntact information, and/or ample		<del></del>
NOTE: Change of name, contact information, and/or employer must be submitted in writing to the EMS Agency within 30 days of change			
REQUIREMENTS			
	urrent and applicant shall p	rovide front and back copies	of all documents
☐ CA EMT Certification Card			
☐ Government Issued Identific	cation Driver License, Passpo	ort, or California I.D.	
□ Skills Competency Verificat	ion (EMSA SCV Form) Must	be completed by an approved provider in	n current certification cycle or within 1 yr for lapse ≥ 12 months
☐ BLS for the Healthcare Prov	vider Card BLS must be valid	a minimum of 3 months beyond EMT red	certification date. Online programs are NOT accepted.
☐ L.A. County EMT Scope of			
☐ EMS Continuing Education		completed during current certification cyc n 8 hours per day issued from an approve	ele or within previous 24 months of this application for lapse.
□ 24 hours (current or lapse	` '		48 hours (lapse of ≥ 12 months and < 24 months)
		apse 2 o montris and < 12 montris)	40 hours (lapse of 2 12 hours and < 24 hours)
Additional Requirements			
	tion issued by another entity/agency of	r lapse ≥ 12 months and < 24 months	
□ NREMT Written Exam Pass	s Letter CA Certification lapse	e ≥ 12 months and < 24 months	
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BACKGROUND DISCLOS	SURE		
BACKGROUND DISCLOS  ▶ Have you ever been arr	rested or convicted of any fe	elony or misdemeanor offense	
BACKGROUND DISCLOS  Have you ever been arr state or place, includin	rested or convicted of any for g entering a plea of nolo co	ntendere (no contest) or any o	
BACKGROUND DISCLOS     Have you ever been arrestate or place, includin sealed or expunged (see	rested or convicted of any fo g entering a plea of nolo co et aside) under Penal Code S	ntendere (no contest) or any o Section 1203.4?	conviction which has been □ Yes □ No
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